

AMERICAN EMBASSY KAMPALA
COMMUNITY GRANTS FOR HIV/AIDS
FY 2006 PROGRAM GUIDELINES AND APPLICATION

GUIDELINES

Community Grants for HIV/AIDS are designed to assist communities and families with small-scale development projects that provide care or economic support to children affected by AIDS and People Living with HIV/AIDS (PLHIV) at the grassroots level. All projects funded by these grants must contribute directly to the achievement of the President's Emergency Plan for AIDS Relief (PEPFAR). The goal of PEPFAR is to provide care and support to 10,000,000 people worldwide, including Orphans and Vulnerable Children (OVC). All applications must list target beneficiaries.

Strong Community Involvement and Commitment are Prerequisites for Consideration

Community Grants for HIV/AIDS support community groups in such efforts as: implementing income generation or agricultural projects; assisting local health clinics; providing infrastructure for vocational training; providing services to families caring for orphans. Examples of funding under this program have included: \$4,800 for a ground nut farming income generation project in eastern Uganda to benefit orphaned children and a group of HIV-positive adults in a "post test" club; an HIV/AIDS testing program in southwestern Uganda which includes funds for tests, counseling services, and follow-up; and \$5,800 for building renovations, pit latrines, and provision of clean water to an orphanage in northern Uganda.

The amount of money available to fund these projects is small. Therefore, grants will range from 9 million to 40 million Ugandan Shillings (\$5,000-\$25,000). Competition is stiff for these funds. Only well-planned proposals from well-organized groups will receive aid.

There are no application deadlines. Proposals are reviewed and money is granted on a rolling basis. However, any proposals received after March, will not be considered for funding under this year's program. But will be considered for funding in the following fiscal year.

Criteria

1. Activities funded by Community Grants for HIV/AIDS should involve **significant contribution** of materials, management and/or labor by the local community. The US contribution is to serve primarily as a catalyst.
2. Projects must be within the means and skills of the community to operate and should be **completed within six months** of the authorization of the grant.
3. Activities should be **self-sustaining**. This program provides one-time grants. In order to be eligible for funds, a proposal must demonstrate that the group applying for funds will be able to sustain the project activities without further assistance after completion of the Community Grants for HIV/AIDS funded project.

4. Grants will be given to groups or communities with proven records of accomplishment of project objectives. Serious consideration will be given to groups who have submitted applications with **realistic, specific, and well thought-out budgets and thoroughly planned proposals**.
5. Projects should address an **immediate need** and have a **demonstrable impact** on the quality of life of OVCs and PHAs in the community.
6. Community Grants for HIV/AIDS are **not intended to fund private profit-making activities**. Although the US Government's other aid activities vigorously support and encourage private enterprises and cooperative businesses, it is not the purpose of this particular fund to give grants to entrepreneurs.
7. Funds distributed under Community Grants for HIV/AIDS **cannot provide money** for vehicles, computers, religious instruction, or general operating expenses such as rent, salaries, fuel, electricity bills, etc.
8. Projects will be evaluated on the following criteria:
 - (a) How will OVCs and PHAs benefit?
 - (b) Does the community need this project?
 - (c) What kind of relationship exists between the leadership and the grassroots community people? Who will be asked to do the work in this project?
 - (d) How well will this group work together to finish the project?
 - (e) What sort of evidence can the project leaders show us to indicate that the group in question will completely finish the project in the agreed time and that all funds and materials will be accounted for?

APPLICATION FOR COMMUNITY GRANTS FOR HIV/AIDS FUNDS

Please read the above Community Grants for HIV/AIDS guidelines carefully before filling out this form.

Answer all questions completely.

Use a separate sheet of paper if necessary.

Send the application to: Small Grants Coordinator, American Embassy, P.O. Box 7007, Kampala. If you have e-mail access, you may also send the application by e-mail to kampalapepfar@state.gov

For access to an electronic version of this form (and other Embassy Small Grants forms), please see http://kampala.usembassy.gov/grants_programs.html

1. Name of project and concise description of project:

2. Location of project: district, sub-county, village name, and distance from the nearest large town.

3. Name, on-site address, telephone number, and e-mail (if any) of organization applying for funds:

4. Full name, title, address, telephone number, and e-mail (if any) of the full-time resident, on-site coordinator(s). Please provide his/her/their qualifications:

5. Full name, title, address, telephone number, and e-mail (if any) of individual requesting funds on behalf of the organization:

6. If the organization is not based in Kampala, please give the full name, address and telephone number of an individual in Kampala who can receive and relay messages to the organization. A contact person who can be reached by telephone must be listed for each group to facilitate communication.

7. Please briefly answer the following questions about your organization in the spaces below:

(a) When was it founded?

(b) What are its goals and objectives?

(c) How many people are members of your organization?

(d) What kind of activities has the organization sponsored in the past?

(e) How has money been raised for past activities?

(f) What is the organization's yearly budget?

(g) Is there a connection to a religious organization? Which religious organization?

(h) List past and present assistance from the Ugandan government or any other donor, foreign or domestic in the table below:

Previous Donor Assistance

Govt/Well Wisher/Other Donor Organization	Amount Granted in Dollars or UGSHs	Year Donated or Granted	Purpose of Assistance	Was the Project Completed?	Termination Date

8. Please provide a short concise description of the project proposed (i.e.; borehole construction, grinding mill and grinding mill house, primary school classroom, etc.) for Community Grants for HIV/AIDS funding. Describe why the project is necessary or desirable and generally what benefits it will bring to OVCs and PHAs. If possible, attach a letter of support from a local council official confirming that the project fits into community care and support needs. More specific details about beneficiaries should be addressed in question 12.

(a) Concise description of project:

(b) Why is the project necessary?

(c) What benefit will it bring to children or adults affected by HIV/AIDS?

(d) What steps have been taken so far on the project?

(e) How will the project be sustainable in the future?

(f) What is the project implementation timetable?

9. Please provide a **detailed budget** either in US dollars or Ugandan shillings.

(a) List all materials and expenses that will be needed to complete the project. **Attach original pro-forma invoices.** Be specific in providing these details.

(b) Provide a detailed list indicating which materials or expenses would be provided by the organization/community and which ones the Community Grants for HIV/AIDS program would provide. Use the format in the example below.

(c) Provide a recent bank statement for the applying organization to give a picture of the group's current financial status.

Example of budget format:

Item	No. of Items	Unit Cost	Total Cost	
			Organization Contribution	Embassy Contribution
Total Organization Contribution			XXXXXXXXXX	
Total Embassy Contribution				XXXXXXXXXX

Note:

While grant amounts are in US dollars, payments are made in Ugandan shillings. The organizations given Community Grants for HIV/AIDS funds are responsible for locating reliable suppliers and obtaining pro-forma invoices.

10. Please summarize the budget here (in US dollars and Ugandan shillings)

Total organization/local community's contribution: _____

Total Community Grants for HIV/AIDS contribution: _____

Other financing sources (specify source/amount per donor): _____

Grand total: _____

11. If the project will provide a financial return, describe what return is expected, who will receive the money, and how the account books will be checked by the organization.

12. Project Beneficiaries: To receive funding from the Community Grants for HIV/AIDS program, a project must provide care and support to Orphans and Vulnerable Children (OVC) and/or People Living with HIV/AIDS (PHA). Please demonstrate the way in which your project will achieve this by providing the following detailed information:

Number of direct beneficiaries:

A: # of male OVCs (under 18) receiving care and support

B: # of female OVCs (under 18) receiving care and support

C. # of PHAs receiving care and support

In calculating direct beneficiaries, please make sure that you only count each person once, i.e.; Do not include the same person in multiple categories such as A and B or A and C.

Example of Form for Direct Beneficiaries:

Name	Village	A		B		C	
		Male OVCs Under 18	Female OVCs Under 18	PHAs Receiving Care & Support			
1.							
2.							
3.							
4.							

13. Project Location: Please attach a map to this application form. **A project that does not include a detailed map will NOT be considered for funding.** If you are submitting the application via e-mail and cannot attach a map, please send the map to us by post. If there is more than one project site include a map for each location.

Give the milage and detailed directions from the nearest tarmac road to the appropriate trading center and then on to the project site. A stranger to the area should be able to find the project site easily. Start the map from the nearest large town such as Jinja, Masaka, Soroti, etc. Include signs, landmarks, and other related specific details.

14. I/We understand that any US contribution is a one-time grant, that the American Embassy and Ugandan Government **representatives will have the right to inspect the progress of the project at any time**, and that receipts and records are to be kept and made available for up to three years after completion of the project. Project documents must remain at the project for on-site visits.

Printed name(s) and title(s) of individual(s) requesting Community Grants for HIV/AIDS funds:

Name and title of requester: _____

Signature of requester: _____

Attach photo here:



Note: If you are sending this application by e-mail please post photos, signature(s) and a map to: Small Grants Coordinator, American Embassy, P.O. Box 7007, Kampala.

Name and title of requester: _____

Signature of requester: _____

Attach photo here:



Response to proposals:

Due to the high volume of applications, we will not notify an applicant or group unless the project is selected. Please insure that your contact information, i.e.; names, addresses, phone numbers, etc., are correct. If you wish to check on the status of your proposal, call the Small Grants office at 041 259 791, ext. 6444 or ext. 6141.

Grants are usually awarded between May and September.

Review process:

The Small Grants office conducts preliminary reviews in the months from November to January. These may or may not include pre-site visits. A shortlist is then presented to a US Embassy committee for final selection. During this time roughly between January and April, the coordinators work with potential grantees on finalizing the activities or revising the proposals as well as line-itemized budgets. These exercises do not guarantee funding.